الم المرابعة

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number 10/699313 M 913.12-0009

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OTHER THAN	
TOTAL CLAIMS			20					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		* _			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 =		2			X43=		OR	X86=	172
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR		775
* If the difference in column 1 is less than zero, enter "0" in colum						column 2	1	TOTAL		OR	TOTAL	942
CLAIMS AS AMENDED - PART II										4	OTHER	
(Column 1)			(Column 2)			(Column 3)	١,	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A	10-30-03	REMAINING		NUME PREVIC PAID F	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 20	Minus	# Z0	2	= Ø	11	X\$ 9=		OR	X\$18=	
AME	Independent	* 5	Minus	ENDENT	CLAIM	<u> </u>] [X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1	+145=		OR	+290=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	1
(Column 1) (Column 2) (Column 3)											ADDIT_1 EE	·
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	1	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM .							+145=		OR	+290 <u>=</u>	
							L	TOTAL ODIT. FEE			TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)						l
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	1 [X\$ 9=		OR	X\$18=	
	Independent	•	Minus	###			l	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE ADDIT. FEE OR ADDIT. FEE												
		ber Previously Paid					er foun	id in the appi	opriate box	in colu	ımn 1.	